

Fill in this information to identify your case:

Debtor 1 MONIQUE RENEE BECKWORTH
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: District of New Jersey

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from Schedule A/B	\$ 450,000.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$ 16,750.00
1c. Copy line 63, Total of all property on Schedule A/B	\$ 466,750.00

Part 2: Summarize Your Liabilities

	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$ 462,500.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$ 0
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$
Your total liabilities	\$ 462,500.00

Part 3: Summarize Your Income and Expenses

4. Schedule I: Your Income (Official Form 106I)	
Copy your combined monthly income from line 12 of Schedule I	\$ 12,670.00
5. Schedule J: Your Expenses (Official Form 106J)	
Copy your monthly expenses from line 22c of Schedule J	\$ 449,830.00

See non-borrower financial contribution form attached.

Debtor 1

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Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☒ Yes

7. What kind of debt do you have?

- ☒ Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$ _____

Non-borrower financial contribution form attached.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule EF:

From Part 4 on Schedule EF, copy the following:

9a. Domestic support obligations (Copy line 6a.)

Total claim
\$ _____

9b. Taxes and certain other debts you owe the government. (Copy line 6b.)

\$ _____

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)

\$ _____

9d. Student loans. (Copy line 6f.)

\$ _____

9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)

\$ _____

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

+ \$ _____

9g. Total. Add lines 9a through 9f.

\$ _____

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(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the District of New Jersey

Case number K18-35243

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Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☐ No. Go to Part 2.
☒ Yes. Where is the property?

1.1. 13 Garden Gate Ct.
Street address, if available, or other description

P.O. Box 342

Columbus, NJ 08022
City State ZIP Code

Burlington
County

What is the property? Check all that apply.

- ☒ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other

Who has an interest in the property? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? \$ 450,000
Current value of the portion you own? \$ 450,000

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee Simple

☐ Check if this is community property (see instructions)

If you own or have more than one, list here:

1.2. _____
Street address, if available, or other description

City State ZIP Code

County

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? \$ _____
Current value of the portion you own? \$ _____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ Check if this is community property (see instructions)

Debtor 1

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1.3.

Street address, if available, or other description

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ \$

City

State

ZIP Code

- ☐ Timeshare
☐ Other

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

County

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number:

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.

\$ 450,000

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☐ No
☒ Yes

3.1. Make: KIA
Model: Sedona
Year: 2015
Approximate mileage: 45,000
Other information:

Who has an interest in the property? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ 12,500.00 \$

If you own or have more than one, describe here:

3.2. Make:
Model:
Year:
Approximate mileage:
Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ \$

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3.3 Make: _____
Model: _____
Year: _____
Approximate mileage: _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? _____ Current value of the portion you own? _____

☐ Check if this is community property (see instructions)

3.4 Make: _____
Model: _____
Year: _____
Approximate mileage: _____
Other information: _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? _____ Current value of the portion you own? _____

☐ Check if this is community property (see instructions)

\$ _____ \$ _____

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☒ No
☐ Yes

4.1 Make: _____
Model: _____
Year: _____
Other information: _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? _____ Current value of the portion you own? _____

☐ Check if this is community property (see instructions)

\$ _____ \$ _____

If you own or have more than one, list here:

4.2 Make: _____
Model: _____
Year: _____
Other information: _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? _____ Current value of the portion you own? _____

☐ Check if this is community property (see instructions)

\$ _____ \$ _____

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

\$ 12,500.00

Debtor 1

MONIQUE RENEE BECKWORTH

First Name

Middle Name

Last Name

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Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?

Do not deduct secured claims or exemptions

Minimal with non-borrower Jerome Beckworth

6. Household goods and furnishings

☒ No

☐ Yes. Describe.

\$

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☒ No

☐ Yes. Describe.

\$

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

☒ No

☐ Yes. Describe.

\$

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis, canoes and kayaks; carpentry tools; musical instruments

☒ No

☐ Yes. Describe.

\$

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

☒ No

☐ Yes. Describe.

\$

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

☐ No

☒ Yes. Describe.

Clothing, etc.

\$ 1,000.00

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No

☒ Yes. Describe.

Everyday jewelry

\$ 1,000.00

13. Non-farm animals

Examples: Dogs, cats, birds, horses

☒ No

☐ Yes. Describe.

\$

14. Any other personal and household items you did not already list, including any health aids you did not list

☒ No

☐ Yes. Give specific information.

\$

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here



\$

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Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

I have an equitable interest with my husband,
 Jerome Beckworth, non-borrower

Current value of the
 portion you own?

Do not deduct secured claims
 or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ No

☒ Yes

Cash: \$ 250.00

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses,
 and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No

☒ Yes

Institution name:

17.1. Checking account:	Wells Fargo Bank	\$ 2,000.00
17.2. Checking account:	Equitable Interest with Jerome	\$
17.3. Savings account:	Beckworth, non-borrower	\$
17.4. Savings account:		\$
17.5. Certificates of deposit:		\$
17.6. Other financial account:		\$
17.7. Other financial account:		\$
17.8. Other financial account:		\$
17.9. Other financial account:		\$

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

☒ No

☐ Yes

Institution or issuer name:

	\$
	\$
	\$

**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in
 an LLC, partnership, and joint venture**

☒ No

☐ Yes. Give specific
 information about
 them.

Name of entity	% of ownership	\$
	0%	\$
	0%	\$
	0%	\$

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20. Government and corporate bonds and other negotiable and non-negotiable instruments

*Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.
Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.*

☒ No

☐ Yes. Give specific Issuer name:

Item

\$

\$

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☒ No

☐ Yes. List each account separately. Type of account: Institution name:

401(k) or similar plan:

\$

Pension plan:

\$

IRA:

\$

Retirement account:

\$

Keogh:

\$

Additional account:

\$

Additional account:

\$

22. Security deposits and prepayments

*Your share of all unused deposits you have made so that you may continue service or use from a company
Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others*

☒ No

☐ Yes Institution name or individual:

Electric:

\$

Gas:

\$

Heating oil:

\$

Security deposit on rental unit:

\$

Prepaid rent:

\$

Telephone:

\$

Water:

\$

Rented furniture:

\$

Other:

\$

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

☒ No

☐ Yes Issuer name and description:

\$

\$

\$

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24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No

☐ Yes

Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

\$

\$

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

☒ No

☐ Yes. Give specific

information about them.

\$

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property
Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☒ No

☐ Yes. Give specific

information about them.

\$

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☒ No

☐ Yes. Give specific

information about them.

\$

Money or property owed to you?

No

Current value of the portion you own?
Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

☐ No

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.

Federal:

\$

State:

\$

Local:

\$

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☐ No

☐ Yes. Give specific information.

Alimony:

\$

Maintenance:

\$

Support:

\$

Divorce settlement:

\$

Property settlement:

\$

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits, unpaid loans you made to someone else

☐ No

☐ Yes. Give specific information.

\$

Debtor 1 **MONIQUE RENEE BECKWORTH**
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31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☒ No

☐ Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Summand or refund value:

\$

\$

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

☒ No

☐ Yes. Give specific information.

\$

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

☒ No

☐ Yes. Describe each claim.

\$

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

☒ No

☐ Yes. Describe each claim.

\$

35. Any financial assets you did not already list

☒ No

☐ Yes. Give specific information.

\$

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here →

\$ 4,350.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

☒ No. Go to Part 6.

☐ Yes. Go to line 38.

Current value of the portion you own?
Do not deduct secured claims or exemptions

38. Accounts receivable or commissions you already earned

☐ No

☐ Yes. Describe

\$

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

☐ No

☐ Yes. Describe

\$

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40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

☐ No

☐ Yes. Describe

41. Inventory

☐ Yes. Describe

42. Interests in partnerships or joint ventures

☐ No

☐ Yes. Describe

Name of entity:

% of ownership:

%

\$

%

\$

%

\$

43. Customer lists, mailing lists, or other compilations

☐ No

☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?

☐ No

☐ Yes. Describe

44. Any business-related property you did not already list

☐ No

☐ Yes. Give specific information

\$

\$

\$

\$

\$

\$

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here

\$

Part 6:

Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

☒ No. Go to Part 7.

☐ Yes. Go to line 47.

Current value of the
portion you own?

Do not enter a value if the
property is exempt from
creditors.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

☐ No

☐ Yes

\$

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48. Crops—either growing or harvested

☐ No

☐ Yes. Give specific information

\$

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

☐ No

\$

50. Farm and fishing supplies, chemicals, and feed

☐ No

☐ Yes

\$

51. Any farm- and commercial fishing-related property you did not already list

☐ No

☐ Yes. Give specific information

\$

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here →

\$

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

☒ No

☐ Yes. Give specific information

\$

\$

\$

54. Add the dollar value of all of your entries from Part 7. Write that number here →

\$

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2 → \$ 450,000.00

56. Part 2: Total vehicles, line 5 \$ 12,500.00

57. Part 3: Total personal and household items, line 15 \$ 2,000.00 with non-borrower

58. Part 4: Total financial assets, line 36 \$ 2,250.00 with non-borrower

59. Part 5: Total business-related property, line 45 \$

60. Part 6: Total farm- and fishing-related property, line 52 \$

61. Part 7: Total other property not listed, line 54 + \$

62. Total personal property. Add lines 56 through 61. \$ 4,250.00 Copy personal property total → + \$ 16,750.00

63. Total of all property on Schedule A/B. Add line 55 + line 62 \$ 466,750.00

Fill in this information to identify your case:

Debtor 1 MONIQUE RENEE BECKWORTH
First Name Middle Name Last Name

Debtor 2 _____
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the _____ District of New Jersey

Case number K18-35243
(if known)

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? *Check one only, even if your spouse is filing with you.*

- ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
☒ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own <small>Copy the value from <i>Schedule A/B</i></small>	Amount of the exemption you claim <small>Check only one box for each exemption</small>	Specific laws that allow exemption
Brief description: <u>clothing</u> Line from <i>Schedule A/B</i> : <u>11</u>	\$ <u>1,000.00</u>	<input checked="" type="checkbox"/> \$ <u>1,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(b)(2)</u>
Brief description: <u>Jewelry</u> Line from <i>Schedule A/B</i> : <u>12</u>	\$ <u>1,000.00</u>	<input type="checkbox"/> \$ <u>1,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(b)(2)</u>
Brief description: <u>Cash</u> Line from <i>Schedule A/B</i> : <u>16</u>	\$ <u>250.00</u>	<input type="checkbox"/> \$ <u>250.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(b)(2)</u>

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No
☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
☒ No
☐ Yes

Debtor 1

MONIQUE RENEE BECKWORTH
First Name Middle Name Last Name

Case number (if known) K18-35243

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption</small>	Specific laws that allow exemption
Line from description: Wells Fargo Bank Schedule A/B:	\$ 2,000.00	<input checked="" type="checkbox"/> \$ 2,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	contribution 11 U.S.C. §522(b)(2)
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____

Fill in this information to identify your case:

Debtor 1 MONIQUE RENEE BECKWORTH
First Name Middle Name Last Name
 Debtor 2 _____
(Spouse, if filing) First Name Middle Name Last Name
 United States Bankruptcy Court for the: District of New Jersey

K18 35243

amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion if any
---	--	--

21 Wells Fargo
Home Mtg.

Describe the property that secures the claim:

\$ 450,000 \$ \$

Creditor's Name

13 Garden Gate Court
Columbus, NJ 08022

Number Street

P.O. Box 10335

As of the date you file, the claim is: Check all that apply.

Des Moines, IA 50306

City State ZIP Code

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Who owes the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Nature of lien Check all that apply.

- ☒ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☐ Other (including a right to offset)

☐ Check if this claim relates to a community debt

Date debt was incurred

Last 4 digits of account number

22 Santander Consumer
USA, Inc.

Describe the property that secures the claim:

\$ 12,500 \$ \$

Creditor's Name

Vehicle Car

Number Street

P.O. Box 961245

As of the date you file, the claim is: Check all that apply.

Ft. Worth, TX 76161

City State ZIP Code

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Nature of lien Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☐ Other (including a right to offset)

☐ Check if this claim relates to a community debt

Date debt was incurred 2015

Last 4 digits of account number 1245

Add the dollar value of your entries in Column A on this page. Write that number here:

\$ 462,500

Fill in this information to identify your case:

Debtor 1 MONIQUE RENEE BECKWORTH
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the District of NEW JERSEY

Case number K18-35243
(if known)

☐ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

☒ No. Go to Part 2.

☐ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

21

Priority Creditor's Name

Number Street

City State ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No

☐ Yes

Last 4 digits of account number

\$ \$ \$

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of PRIORITY unsecured claim:

☐ Domestic support obligations

☐ Taxes and certain other debts you owe the government

☐ Claims for death or personal injury while you were intoxicated

☐ Other. Specify

22

Priority Creditor's Name

Number Street

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No

☐ Yes

Last 4 digits of account number

\$ \$ \$

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of PRIORITY unsecured claim:

☐ Domestic support obligations

☐ Taxes and certain other debts you owe the government

☐ Claims for death or personal injury while you were intoxicated

☐ Other. Specify

Debtor 1 **MONIQUE RENEE BECKWORTH**

Case number (if known) **K18-35243**

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
☒ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.1	<p>CHASE CARD SERVICES</p> <p>Nonpriority Creditor's Name</p> <p>P.O. Box 15298</p> <p>Number Street</p> <p>Wilmington, DE 19850</p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number 3 1 1 8</p> <p>When was the debt incurred? 2003</p> <p>\$ 14,000</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____</p>
4.2	<p>Kohl's Department Store</p> <p>Nonpriority Creditor's Name</p> <p>N56 W17000 Ridgewood Drive</p> <p>Number Street</p> <p>Menomonee Falls, WI 53051</p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number 4 7 0 1</p> <p>When was the debt incurred? 2016</p> <p>\$ 700</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____</p>
4.3	<p>Macy's Credit & Customer Svce.</p> <p>Nonpriority Creditor's Name</p> <p>P.O. Box 8113</p> <p>Number Street</p> <p>Mason, Ohio 45040</p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number 8 2 4 1</p> <p>When was the debt incurred? 1992</p> <p>\$ 9,000</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____</p>

Debtor	MONIQUE RENEE BECKWORTH		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the District of New Jersey			
K18-35243			
(If known)			

amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/18

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- ☒ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
☐ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

2.1

Name
Number Street
City State ZIP Code

2.2

Name
Number Street
City State ZIP Code

2.3

Name
Number Street
City State ZIP Code

2.4

Name
Number Street
City State ZIP Code

2.5

Name
Number Street
City State ZIP Code

Fill in this information to identify your case:

Debtor 1 MONIQUE RENEE BECKWORTH
First Name Middle Name Last Name
Debtor 2
(Spouse, if filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: District of New Jersey
Case number K18-35243
(If known)

☐ Check if this is an amended filing

Official Form 106H

12/15

Schedule H: Your Codebtors

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

☒ No

☐ Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

☒ No. Go to line 3.

☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

☐ No

☐ Yes. In which community state or territory did you live? _____ Fill in the name and current address of that person.

Name of your spouse, former spouse, or legal equivalent

Number Street

City

State

ZIP Code

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply

3.1

Name

Number Street

City

State

ZIP Code

☐ Schedule D, line _____

☐ Schedule E/F, line _____

☐ Schedule G, line _____

3.2

Name

Number Street

City

State

ZIP Code

☐ Schedule D, line _____

☐ Schedule E/F, line _____

☐ Schedule G, line _____

3.3

Name

Number Street

City

State

ZIP Code

☐ Schedule D, line _____

☐ Schedule E/F, line _____

☐ Schedule G, line _____

MM / DD / YYYY

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Debtor 1 **MONIQUE RENEE BECKWORTH**
First Name Middle Name Last Name

Case number (if known) **K18-35243**

	For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here → 4	\$2200.00	\$6500.00	
5. List all payroll deductions:			
5a. Federal income and Social Security deductions	\$ 300.00	\$	
5b. Mandatory contributions for retirement plans	\$	\$	
5c. Voluntary contributions for retirement plans	\$	\$	
5d. Required repayments of retirement fund loans	\$	\$	
5e. Insurance	\$ 110.00	\$	
5f. Domestic support obligations	\$	\$	
5g. Union dues	\$ 20.00	\$	
5h. Other deductions. Specify: _____	+\$ 430.00	+\$	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	\$	\$	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	\$ 1770.00	\$ 6500.00	
8. List all other income regularly received:			
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	\$	\$ See attached	
8b. Interest and dividends	\$	\$	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	\$	\$	
8d. Unemployment compensation	\$	\$	
8e. Social Security	\$	\$	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	\$	\$	
8g. Pension or retirement income	\$	\$	
8h. Other monthly income. Specify: _____	+\$	+\$	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	\$	\$	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	\$ 1770	\$ 10,900	= \$12,670
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____			
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies			12. \$12,670 Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form? <input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes. Explain: Increase-Will earn more money-Both Monique Beckworth and Non-Borrower, Jerome Beckworth			

Fill in this information to identify your case:

Debtor 1 MONIQUE RENEE BECKWORTH
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing)
First Name Middle Name Last Name

United States Bankruptcy Court for the: District of New Jersey

Case number K-18-35243

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM/DD/YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

☒ No. Go to line 2.

☐ Yes. Does Debtor 2 live in a separate household?

☐ No

☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

☐ No

☒ Yes. Fill out this information for each dependent.

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Jalen

14

☐ No

☒ Yes

Sierra

12

☐ No

☒ Yes

Paris

9

☐ No

☒ Yes

Aliya

4

☐ No

☒ Yes

All last names are Beckworth

☐ No

☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

☐ No

☒ Yes

To Some Extent-Husband

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

The rental of your new home is paid for by your husband. He has paid the mortgage payments and any rent for the ground or lot. \$ 4200.00

If not included in line 4:

4a. Real estate taxes

4a. \$ 100.00

4b. Property, homeowner's, or renter's insurance

4b. \$

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 100.00

4d. Homeowner's association or condominium dues

4d. \$

Debtor 1

MONIQUE RENEE BECKWORTH
First Name Middle Name Last Name

Case number (if known) **K18-35243**

Your expenses

5. Additional mortgage payments for your residence, such as home equity loans	5.	\$	
6. Utilities:			
6b. Water, sewer, garbage collection	6b.	\$	75.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	450.00
6d. Other. Specify: _____	6d.	\$	
7. Food and housekeeping supplies	7.	\$	200.00
8. Childcare and children's education costs	8.	\$	
9. Clothing, laundry, and dry cleaning	9.	\$	20.00
10. Personal care products and services	10.	\$	10.00
11. Medical and dental expenses	11.	\$	50.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$	50.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	10.00
14. Charitable contributions and religious donations	14.	\$	
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
15a. Life insurance	15a.	\$	20.00
15b. Health insurance	15b.	\$	
15c. Vehicle insurance	15c.	\$	25.00
15d. Other insurance. Specify: _____	15d.	\$	
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16.	\$	
17. Installment or lease payments:			
17a. Car payments for Vehicle 1	17a.	\$	440.00
17b. Car payments for Vehicle 2	17b.	\$	
17c. Other. Specify: _____	17c.	\$	
17d. Other. Specify: _____	17d.	\$	
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$	
19. Other payments you make to support others who do not live with you. Specify: _____			
19.	\$		
20. Other real property expenses not included in lines 4 or 5 of this form or on <i>Schedule I, Your Income</i> .			
20a. Mortgages on other property	20a.	\$	
20b. Real estate taxes	20b.	\$	
20c. Property, homeowner's, or renter's insurance	20c.	\$	
20d. Maintenance, repair, and upkeep expenses	20d.	\$	
20e. Homeowner's association or condominium dues	20e.	\$	

Debtor 1 **MONIQUE RENEE BECKWORTH**
First Name Middle Name Last Name

Case number (if known) **K18-35243**

21. Other. Specify: _____

21. +\$ _____

22 Calculate your monthly expenses.

22a. Add lines 4 through 21.

22a. \$ **1500.00**

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. \$ **N/A**

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. \$ **1500.00**

23 Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.

23a. \$ **1700.00**

23b. Copy your monthly expenses from line 22c above.

23b. -\$ **1500.00**

23c. Subtract your monthly expenses from your monthly income.
The result is your monthly net income.

23c. \$ **270.00**

24 Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

☒ Yes.

Explain here: I will increase my pay from work. Please note that my husband, Jerome Beckworth has filed a Non-Borrower Financial Contribution Form, a copy of which is attached. He will contribute the amount necessary to make the payments, including home ownership expenses for my residence.

☒ Check if this is an amended filing

12/16

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3671.

Date MM / DD / YYYY

Fill in this information to identify your case:

Debtor 1 MONIQUE RENEE BECKWORTH
First Name Middle Name Last Name
Debtor 2
(Spouse, if filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: District of New Jersey
Case number K18-35243
(if known)

☐ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

- ☒ Married
☐ Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- ☒ No
☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:

Dates Debtor 1
lived there

☐ Same as Debtor 1

Number Street

From _____
To _____

City State ZIP Code

Number Street

City State ZIP Code

☐ Same as Debtor 1

Number Street

From _____
To _____

City State ZIP Code

Number Street

City State ZIP Code

Dates Debtor 2
lived there

☐ Same as Debtor 1

From _____
To _____

☐ Same as Debtor 1

From _____
To _____

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☒ No
☐ Yes. Make sure you fill out Schedule H: Your Creditors (Official Form 106H).

Part 2: Explain the Sources of Your Income

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

Case number (if known) K18-35243

Debtor 1 MONIQUE RENEE BECKWORTH
First Name Middle Name Last Name

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?
Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.
If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

☒ No
☐ Yes. Fill in the details.

Sept thru Dec 2018

Period	Sources of Income Check all that apply:	Gross Income (before deductions and exclusions)	Sources of Income Check all that apply:	Gross Income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$ <u>7,700.00</u>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$ _____
For last calendar year: (January 1 to December 31, <u>2018</u>)	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$ <u>12,000.00</u>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$ _____
For the calendar year before that: (January 1 to December 31, <u>2017</u>)	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$ <u>12,000.00</u>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$ _____

5. Did you receive any other income during this year or the two previous calendar years?
Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.
List each source and the gross income from each source separately. Do not include income that you listed in line 4.

☒ No
☐ Yes. Fill in the details.

Period	Debtor 1 Sources of Income Describe below.	Gross Income from each source (before deductions and exclusions)	Debtor 2 Sources of Income Describe below.	Gross Income from each source (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	_____	\$ _____	_____	\$ _____
	_____	\$ _____	_____	\$ _____
	_____	\$ _____	_____	\$ _____
For last calendar year: (January 1 to December 31, <u>2018</u>)	_____	\$ _____	_____	\$ _____
	_____	\$ _____	_____	\$ _____
	_____	\$ _____	_____	\$ _____
For the calendar year before that: (January 1 to December 31, <u>2017</u>)	_____	\$ _____	_____	\$ _____
	_____	\$ _____	_____	\$ _____
	_____	\$ _____	_____	\$ _____

Case number (if known) K18-35243

Debtor 1
First Name MONIQUE Middle Name RENEE Last Name BECKWORTH

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "debts incurred by an individual primarily for family or household purpose."

☐ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

☐ No. Go to line 7.

☐ Yes. List below each creditor to whom you paid a total of \$6,225* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.

☒ Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

☐ No. Go to line 7.

☒ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name	Number	Street	City	State	ZIP Code	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
<u>Santander Consumer USA, Inc.</u>						<u>Oct., Nov. & Dec.</u>	<u>\$1,322.00</u>	<u>\$12,500.00</u>	<input type="checkbox"/> Mortgage <input checked="" type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other
<u>P.O. Box 961245</u>									
<u>Ft. Worth, TX</u>									
<u>76161-1245</u>									
<u>Kohls</u>						<u>Oct. & Nov.</u>	<u>\$200.00</u>	<u>\$500.00</u>	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input checked="" type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other
<u>N56 W17000</u>									
<u>Ridgewood Drive</u>									
<u>Menomonee Falls, WI</u>									
<u>53051</u>									
<u>Macy's Credit & Service</u>						<u>Oct.</u>	<u>\$200.00</u>	<u>\$7,500.00</u>	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input checked="" type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other
<u>P.O. Box 8113</u>									
<u>Mason, OH</u>									
<u>45040</u>									

Case number (if known) K18-35243

Debtor 1 MONIQUE RENEE BECKWORTH
 First Name Middle Name Last Name

Not to my knowledge

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an Insider?
Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

☒ No

☐ Yes. List all payments to an Insider.

Insider's Name	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name		\$ _____	\$ _____	
Number Street				
City State ZIP Code				
Insider's Name		\$ _____	\$ _____	
Number Street				
City State ZIP Code				

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an Insider?
 Include payments on debts guaranteed or cosigned by an Insider.

☒ No

☐ Yes. List all payments that benefited an Insider.

Insider's Name	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name		\$ _____	\$ _____	
Number Street				
City State ZIP Code				
Insider's Name		\$ _____	\$ _____	
Number Street				
City State ZIP Code				

Case number (if known) K18-35243

Debtor 1

MONIQUE RENEE BECKWORTH
First Name Middle Name Last Name

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

☒ No

☐ Yes. Fill in the details.

Nature of the case	Court or agency
Case title _____ _____ Case number _____ _____ Case title _____ _____ Case number _____ _____	<div> <input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded </div> <div> <input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded </div>

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.

☒ No. Go to line 11.

☐ Yes. Fill in the information below.

Describe the property	Date	Value of the property
<div> <div>Creditor's Name _____ Number Street _____ City State ZIP Code _____</div> <div> <input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied. </div> </div>	_____	\$ _____
<div> <div>Creditor's Name _____ Number Street _____ City State ZIP Code _____</div> <div> <input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied. </div> </div>	_____	\$ _____

Case number (if known) K18-35243

Debtor 1

MONIQUE RENEE BECKWORTH
First Name Middle Name Last Name

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- ☒ No Not to my knowledge although Wells Fargo would not agree to a modification attempt or meeting.
☐ Yes Fill in the details.

Describe the action the creditor took		Date action was taken	Amount
Creditor's Name			\$
Number Street			
City State ZIP Code	Last 4 digits of account number: XXXX-		

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- ☒ No Not to my knowledge
☐ Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- ☒ No
☐ Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift			\$
Number Street			\$
City State ZIP Code			
Person's relationship to you			
Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift			\$
Number Street			\$
City State ZIP Code			
Person's relationship to you			

Debtor 1 MONIQUE RENEE BECKWORTH
First Name Middle Name Last Name

Case number (if known) K18-35243

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

- ☒ No
☐ Yes. Fill in the details for each gift or contribution.

Charity's Name <small>that total more than \$600</small>	Describe what you contributed	Date you contributed	Value
Charity's Name			\$
Number Street			\$
City State ZIP Code			

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

- ☒ No
☐ Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss <small>Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.</small>	Date of your loss	Value of property lost
			\$

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?
 Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

- ☒ No
☐ Yes. Fill in the details.

Person Who Was Paid	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Number Street			\$
City State ZIP Code			\$
Email or website address			
Person Who Made the Payment, if Not You			

Debtor 1 **MONIQUE RENEE BECKWORTH**
First Name Middle Name Last Name

Case number (if known) **K-18-35243**

Description and value of any property transferred		Date payment or transfer was made	Amount of payment
Person Who Was Paid			\$
Number Street			\$
City State ZIP Code			
Email or website address			
Person Who Made the Payment, if Not You			

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?
 Do not include any payment or transfer that you listed on line 16.

- ☒ No
☐ Yes. Fill in the details.

Description and value of any property transferred		Date payment or transfer was made	Amount of payment
Person Who Was Paid			\$
Number Street			\$
City State ZIP Code			

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?
 Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property).
 Do not include gifts and transfers that you have already listed on this statement.

- ☒ No
☐ Yes. Fill in the details.

Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person Who Received Transfer		
Number Street		
City State ZIP Code		

Person's relationship to you

Person Who Received Transfer	
Number Street	
City State ZIP Code	
Person's relationship to you	

Debtor 1 MONIQUE RENEE BECKWORTH
First Name Middle Name Last Name

Case number (if known) K18-35243

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

☒ No

☐ Yes. Fill in the details.

Who else has or had access to it?

Describe the contents

Do you still have it?

☐ No

☐ Yes

Name of Storage Facility

Name

Number Street

Number Street

City State ZIP Code

City State ZIP Code

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

☒ No

☐ Yes. Fill in the details.

Where is the property?

Describe the property

Value

\$

Owner's Name

Number Street

Number Street

City State ZIP Code

City State ZIP Code

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

☒ No

☐ Yes. Fill in the details.

Governmental unit

Environmental law, if you know it

Date of notice

Name of site

Governmental unit

Number Street

Number Street

City State ZIP Code

City State ZIP Code

Debtor 1 MONIQUE RENEE BECKWORTH
First Name Middle Name Last Name

Case number (if known) K18-35243

25. Have you notified any governmental unit of any release of hazardous material?

☒ No

☐ Yes. Fill in the details.

Governmental unit

Environmental law, if you know it

Date of notice

Name of site

Governmental unit

Number Street

Number Street

City

State ZIP Code

City

State ZIP Code

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

☒ No

☐ Yes. Fill in the details.

Court or agency

Nature of the case

Status of the case

Case title

Court Name

Number Street

City

State ZIP Code

Case number

☐ Pending

☐ On appeal

☐ Concluded

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☒ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)
☐ A partner in a partnership
☐ An officer, director, or managing executive of a corporation
☐ An owner of at least 5% of the voting or equity securities of a corporation

☐ No. None of the above applies. Go to Part 12.

☒ Yes. Check all that apply above and fill in the details below for each business.

Describe the nature of the business

Employer identification number

Do not include Social Security number or ITIN

Rental Property
Business Name

Would help to remove
tenants from rentals

EIN: 81-0611812

VIP Realty, LLC
Number Street

Name of accountant or bookkeeper

Dates business existed

P.O. Box 342

2 years

From 2015 To 2017

Columbus, NJ 08022
City State ZIP Code

Describe the nature of the business

Employer identification number

Do not include Social Security number or ITIN

Business Name

EIN: _____

Number Street

Name of accountant or bookkeeper

Dates business existed

City

State ZIP Code

From _____ To _____

Debtor 1 MONIQUE RENEE BECKWORTH
First Name Middle Name Last Name

Case number (if known) K18-35243

Describe the nature of the business		Employer identification number Do not include Social Security number or ITIN
Business Name		EIN: _____
Number Street	Name of accountant or bookkeeper	Dates business existed
City State ZIP Code		From _____ To _____

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- ☒ No
☐ Yes. Fill in the details below.

Date issued

Name

MM / DD / YYYY

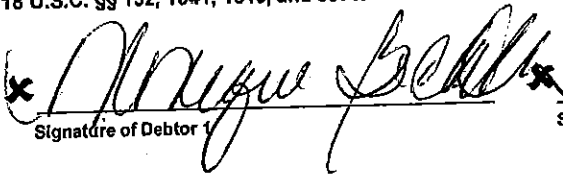
Number Street

City

State ZIP Code

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.


Signature of Debtor 1

Signature of Debtor 2

Date

Date

Did you attach additional pages to Your *Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

- ☒ No
☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- ☒ No
☐ Yes. Name of person _____

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

☐ Check if this is an amended filing

12/15

Debtor 1

MONIQUE RENEE BECKWORTH
First Name Middle Name Last Name

Case number (if known) **K18-35243**

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
7. Interest, dividends, and royalties	\$ 0	\$ 0
8. Unemployment compensation	\$ 0	\$ 0
Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:		
For you	\$	
For your spouse	\$	
9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.	\$ 0	\$ 0
10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.	\$ 0	\$ 0
	\$	\$
Total amounts from separate pages, if any.	+\$ 0	+\$ 0
11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	\$ 2000	\$ 8900
	= \$ 10900	
	Total average monthly income	

Part 2: Determine How to Measure Your Deductions from Income

12. Copy your total average monthly income from line 11. \$ 10,900

13. Calculate the marital adjustment. Check one:

☐ You are not married. Fill in 0 below.

☐ You are married and your spouse is filing with you. Fill in 0 below.

☒ You are married and your spouse is not filing with you.

Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.

Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.

If this adjustment does not apply, enter 0 below.

\$

\$

+\$

Total \$ 0 Copy here →

14. Your current monthly income. Subtract the total in line 13 from line 12. \$ 10,900

15. Calculate your current monthly income for the year. Follow these steps:

15a. Copy line 14 here → \$ 10,900

Multiply line 15a by 12 (the number of months in a year). x 12

15b. The result is your current monthly income for the year for this part of the form. \$ 130,800

Debtor 1 MONIQUE RENEE BECKWORTH
First Name Middle Name Last Name

Case number (if known) K18-35243

16. Calculate the median family income that applies to you. Follow these steps:

16a. Fill in the state in which you live. New Jersey

16b. Fill in the number of people in your household. 6

16c. Fill in the median family income for your state and size of household. \$77,472

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This information is not available for the Guam, Puerto Rico, or U.S. Virgin Islands.

17. How do the lines compare?

17a. ☒ Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, *Disposable income is not determined under 11 U.S.C. § 1325(b)(3)*. Go to Part 3. Do NOT fill out *Calculation of Your Disposable Income* (Official Form 122C-2).

17b. ☐ Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, *Disposable income is determined under 11 U.S.C. § 1325(b)(3)*. Go to Part 3 and fill out *Calculation of Your Disposable Income* (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above.

Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4)

18. Copy your total average monthly income from line 11. \$10,900

19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.

19a. If the marital adjustment does not apply, fill in 0 on line 19a. — \$ 0

19b. Subtract line 19a from line 18. \$10,900

20. Calculate your current monthly income for the year. Follow these steps:

20a. Copy line 19b. \$10,900

Multiply by 12 (the number of months in a year). x 12

20b. The result is your current monthly income for the year for this part of the form. \$130,800

20c. Copy the median family income for your state and size of household from line 16c. \$77,472

21. How do the lines compare?

☐ Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment period is 3 years*. Go to Part 4.

☒ Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, *The commitment period is 5 years*. Go to Part 4.

Part 4: Sign Below

By signing here, under penalty of perjury, I declare that the information on this statement and in any attachments is true and correct.

Signature of Debtor 1

Signature of Debtor 2

Date

MM / DD / YYYY

Date

MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Fill in this information to identify your case:

Debtor 1 MONIQUE RENEE BECKWORTH
First Name Middle Name Last Name
Debtor 2
(Spouse, if filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: District of New Jersey
Case number K18-35243

☐ Check if this is an amended filing

Official Form 122C-2

Chapter 13 Calculation of Your Disposable Income

04/16

To fill out this form, you will need your completed copy of *Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period* (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate Instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C-1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C-1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

4

National Standards

You must use the IRS National Standards to answer the questions in lines 6-7.

6. Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$ 400.00

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories—people who are under 65 and people who are 65 or older—because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

Debtor 1 MONIQUE RENEE BECKWORTH Case number (if known) K18-35243
 First Name Middle Name Last Name

People who are under 65 years of age

7a. Out-of-pocket health care allowance per person \$ 50.00

7b. Number of people who are under 65 6

7c. Subtotal. Multiply line 7a by line 7b. \$ 90.00 Copy here → \$ 90.00

People who are 65 years of age or older

7d. Out-of-pocket health care allowance per person \$ None

7e. Number of people who are 65 or older X

7f. Subtotal. Multiply line 7d by line 7e. \$ Copy here → + \$

7g. Total. Add lines 7c and 7f. \$ Copy here → \$ 90.00

Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15.

Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts:

- Housing and utilities – Insurance and operating expenses
- Housing and utilities – Mortgage or rent expenses

To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

8. Housing and utilities – Insurance and operating expenses: Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. \$ 100.00

9. Housing and utilities – Mortgage or rent expenses:

9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. \$4,200.00

9b. Total average monthly payment for all mortgages and other debts secured by your home.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60.

Name of the creditor	Average monthly payment
<u>Wells Fargo</u>	<u>\$ 4,200.00</u>
<u></u>	<u>\$</u>

+ \$

9b. Total average monthly payment \$ 4,200 Copy here → -\$ 4,200 Repeat this amount on line 33a.

9c. Net mortgage or rent expense

Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this number is less than \$0, enter \$0. \$ Copy here → \$ 4,200.00

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim. \$

Explain why: Wells Fargo Bank needs to give us a modification of amount owed each month. Non-borrower financial contribution form is attached.

Debtor 1 MONIQUE RENEE BECKWORTH Case number (if known) K18-35243
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11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense.

- ☐ 0. Go to line 14.
☒ 1. Go to line 12.
☐ 2 or more. Go to line 12.

12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. \$

13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles.

Vehicle 1 Describe Vehicle 1: KIA Sedona-Year 2015

13a. Ownership or leasing costs using IRS Local Standard \$ 45,000 purchase

13b. Average monthly payment for all debts secured by Vehicle 1.
 Do not include costs for leased vehicles.

To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Name of each creditor for Vehicle 1	Average monthly payment
<u>Santander Consumer</u>	\$ <u>441.00</u>
<u>USA, Inc.</u>	

Total average monthly payment

\$ 441.00

Copy here →

— \$ 441

Repeat this amount on line 33b.

13c. Net Vehicle 1 ownership or lease expense

Subtract line 13b from line 13a. If this number is less than \$0, enter \$0.

\$ 441

Copy net Vehicle 1 expense here →

\$ 441

Vehicle 2 Describe Vehicle 2: _____

13d. Ownership or leasing costs using IRS Local Standard \$ _____

13e. Average monthly payment for all debts secured by Vehicle 2.
 Do not include costs for leased vehicles.

Name of each creditor for Vehicle 2	Average monthly payment
_____	\$ _____ N/A

Total average monthly payment

\$ _____

Copy here →

— \$ _____

Repeat this amount on line 33c.

13f. Net Vehicle 2 ownership or lease expense

Subtract line 13e from 13d. If this number is less than \$0, enter \$0.

\$ _____

Copy net Vehicle 2 expense here →

\$ N/A

14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the Public Transportation expense allowance regardless of whether you use public transportation.

\$ N/A

15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for Public Transportation.

\$ N/A

Debtor 1

MONIQUE RENEE BECKWORTH
First Name Middle Name Last Name

Case number (if known) **K18-35243**

Other Necessary Expenses

In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.

16. **Taxes:** The total monthly amount that you actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes. \$ 750.00

union dues, and uniform costs.

Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. \$ 20.00

18. **Life Insurance:** The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term. \$ 20.00

19. **Court-ordered payments:** The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. \$ N/A
Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.

20. **Education:** The total monthly amount that you pay for education that is either required:
☒ as a condition for your job, or
☒ for your physically or mentally challenged dependent child if no public education is available for similar services. \$ N/A

21. **Childcare:** The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education. \$ 100.00

22. **Additional health care expenses, excluding insurance costs:** The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. \$ N/A
Payments for health insurance or health savings accounts should be listed only in line 25.

23. **Optional telephones and telephone services:** The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. + \$ 200.00
Do not include payments for basic home telephone, internet or cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Form 122C-1, or any amount you previously deducted.

24. **Add all of the expenses allowed under the IRS expense allowances.** \$ 1,090
Add lines 6 through 23.

Additional Expense Deductions

These are additional deductions allowed by the Means Test.
Note: Do not include any expense allowances listed in lines 6-24.

25. **Health insurance, disability insurance, and health savings account expenses.** The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.

Health Insurance \$ 50.00

Disability Insurance \$ _____

Health savings account + \$ _____

Total \$ _____ **Copy total here →** \$ 50.00

Do you actually spend this total amount?

☐ No. How much do you actually spend? \$ _____

Excess

26. **Continuing contributions to the care of household or family members.** The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b). \$ 50.00

27. **Protection against family violence.** The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. \$ N/A
By law, the court must keep the nature of these expenses confidential.

Debtor 1 **MONIQUE RENEE BECKWORTH**
First Name Middle Name Last Name

Case number (if known) **K18-35243**

28. Additional home energy costs. Your home energy costs are included in your Insurance and operating expenses on line 8.

If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8, then fill in the excess amount of home energy costs.

\$ 50

You must give your case trustee documentation of your actual expenses, and you must show that the additional amount claimed is reasonable and necessary.

29. Education expenses for dependent children who are younger than 18. The monthly expenses (not more than \$1,000) for each child that is a dependent child of yours for the year ended on the date of the filing of the petition, for private or public elementary or secondary school.

\$ 50

You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23.

* Subject to adjustment on 4/01/19, and every 3 years after that for cases begun on or after the date of adjustment.

30. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.

\$ 50

To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

You must show that the additional amount claimed is reasonable and necessary.

31. Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 11 U.S.C. § 548(d)(3) and (4).

+ \$ N/A

Do not include any amount more than 15% of your gross monthly income.

32. Add all of the additional expense deductions.

Add lines 25 through 31.

\$ 150.00

Deductions for Debt Payment

33. For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Average monthly payment

Mortgages on your home

33a. Copy line 9b here → \$ 4,200.00

Loans on your first two vehicles

33b. Copy line 13b here → \$ 441.00

33c. Copy line 13e here → \$ 4,641.00

33d. List other secured debts:

Paid by non-borrower financial contribution see form

Name of each creditor for other secured debt

Identify property that secures the debt

Does payment include taxes or insurance?

13 Garden Gate
 Wells Fargo Bank Columbus, NJ
 Santander Bank Insurance
 Vehicle

☐ No
☒ Yes \$ 4,200.00
☐ No
☒ Yes \$ 441.00
☐ No
☐ Yes + \$

33e. Total average monthly payment. Add lines 33a through 33d.

\$ 4,641

Copy total here →

\$ 4,641.00

Debtor 1

MONIQUE RENEE BECKWORTH
First Name Middle Name Last Name

Case number (if known) **K18-35243**

34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?

☒ No. Go to line 35.

☐ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the *cure amount*). Next, divide by 60 and fill in the information below.

secures the debt	amount
_____	\$ _____ + 60 = \$ _____
_____	\$ _____ + 60 = \$ _____
_____	\$ _____ + 60 = + \$ _____
Total	\$ _____

Copy
total
here →

35. Do you owe any priority claims—such as a priority tax, child support, or alimony—that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.

☒ No. Go to line 36.

☐ Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.

Total amount of all past-due priority claims. \$ _____ ÷ 60 \$ _____

36. Projected monthly Chapter 13 plan payment

\$ 620.00

Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts).

To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

X _____

Average monthly administrative expense

\$ _____

Copy
total
here →

37. Add all of the deductions for debt payment. Add lines 33e through 36.

\$ 6,200.00

Total Deductions from Income

38. Add all of the allowed deductions.

Copy line 24, All of the expenses allowed under IRS expense allowances \$ 1,000.00

Copy line 32, All of the additional expense deductions \$ 100.00

Copy line 37, All of the deductions for debt payment + \$ 200.00

Total deductions \$ 1,300.00

Copy
total
here →

\$ 4,900.00

Debtor 1 MONIQUE RENEE BECKWORTH
First Name Middle Name Last Name

Case number (if known) K18-35243

Part 4: Sign Below

By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct.

Signature of Debtor 1

Signature of Debtor 2

Date 1/9/2019
MM/ DD /YYYY

Date
MM/ DD /YYYY

B2030 (Form 2030) (12/15)

United States Bankruptcy Court

District Of New Jersey

~~IN RE: MONIQUE RENEE BECKWORTH~~

Case No. K18-35243

Debtor

Chapter 13

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept \$ 2,000.00

Prior to the filing of this statement I have received \$ 1,000.00

Balance Due \$ 1,000.00

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify)

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;

b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;

c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any subsequent hearings thereof;

B2030 (Form 2030) (12/15)

- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

There would be an additional fee of \$175.00 per hour for attending more than two (2) hearings with the U.S. Trustee and two (2) confirmation hearings. Additionally, the fee charged does not include modification negotiations with the mortgage holder.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Date

1/9/2019

Signature of Attorney

Simon Belli, II Attorney at Law
Name of Law Firm